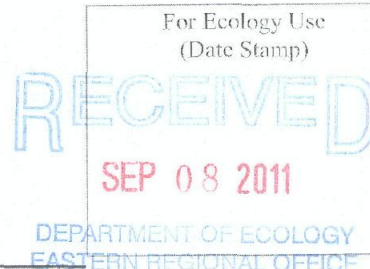


Water Resources Program
Application for a Water Right Permit



- ☒ SURFACE WATER ☐ GROUND WATER ☐ PERMANENT
☐ TEMPORARY ☐ SHORT TERM ☐ DROUGHT

Follow the attached instructions. Attach additional sheets as necessary.

*A NON-REFUNDABLE MINIMUM FEE OF \$50.00 MUST ACCOMPANY THIS APPLICATION.

Section 1. APPLICANT

Applicant/Business Name: City of Pasco - Public Works Department	Phone No: (509) 543-5738	Other No:
Address: 525 North Third Ave. - PO Box 293		
City: Pasco	State: WA	Zip: 99301
Email Address (optional):		

Contact Name (if different from above): Gary Crutchfield	Phone No: (509) 545-3404	Other No:
Relationship to Applicant: City Manager		
Address: 525 North Third Ave - PO Box 293		
City: Pasco	State: WA	Zip: 99301
Email Address (optional):		

Legal Land Owner or Part Owner Name of the Proposed Place of Use: City of Pasco	Phone No: (509) 543-5738	Other No:
Address: 525 North Third Ave - PO Box 293		
City: Pasco	State: WA	Zip: 99301
Email Address (optional):		

Section 2. STATEMENT OF INTENT

Briefly describe the purpose of your proposed project: To obtain water rights for 3,500 ac-ft/year, 38.7 cfs, for Municipal potable water. Rights of withdrawal of 3,500 ac-ft/year for municipal purposes. Water will be treated by the City and then delivered to residences and businesses throughout the City of Pasco.

Anticipated length of time to complete your project: 2 years

Water Use List all purposes for which water will be applied to a beneficial use and list quantity required for each.

Purpose(s) of Use	Rate (check one box only) <input checked="" type="checkbox"/> Cubic Feet per Second (CFS) <input type="checkbox"/> Gallons per Minute (GPM)	Acre-Feet per Year (AF/YR) (If known)	Period of Use (Continuously or Seasonal)
Municipal	38.7	3,500	Continuously
TOTAL:			

38.7 cfs = 17,369 gpm
Fee = \$3870.00 pd \$50.00 OWE \$3820.00

53-30646

Short Term/Temporary Water Use

Is this a request for a short term project (less than four months and non-recurring)? ☐ YES ☒ NO

Is this request for a temporary permit? ☐ YES ☒ NO

If yes to either question above, indicate the dates that the water will be needed:

FROM: ____/____/____ TO: ____/____/____

Section 3. POINT OF DIVERSION OR WITHDRAWAL
(Complete A or B, and C below)

A.) If Surface Water Source	B.) If Ground Water Source
<input type="checkbox"/> Spring <input type="checkbox"/> Creek <input checked="" type="checkbox"/> River <input type="checkbox"/> Lake <input type="checkbox"/> Other: _____	<input type="checkbox"/> Well(s) <input type="checkbox"/> Other: _____
Source Name: <u>Columbia River</u>	Well diameter & depth: _____
Tributary to: _____	Number of proposed points of withdrawal: _____
Number of proposed diversion points: <u>2</u>	Do you have an existing well? <input type="checkbox"/> YES <input type="checkbox"/> NO
Do you have an existing diversion? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	If available, attach Water Well Report and pump test. Well Tag ID No. _____

C.) Point of Diversion/Withdrawal – Legal Description

Parcel No.	¼	¼	Section	Township	Range	County
112300108	SW	NE	31	9	30	Franklin
Lot(s)	Block(s)		Subdivision			

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:
600 Feet (☒ North/☐ South) and 500 feet (☒ East/☐ West)
from the (☐NW ☐SW ☐NE ☐SE ☒ Center) corner of Section 31.

Parcel No.	¼	¼	Section	Township	Range	County
118221157	SW	NW	18	9	29	Franklin
Lot(s)	Block(s)		Subdivision			

If known, enter the distances in feet from the point of diversion or withdrawal to the nearest section corner:
1,600feet (☐ North/☒ South) and 500feet (☒ East/☐ West)
from the (☒NW ☐SW ☐NE ☐SE ☐) corner of Section 18

NOTE: If more than two points of diversion/withdrawal attach additional information on a separate sheet of paper.

Do you own the land on which the proposed point of diversion/withdrawal is located? ☒ YES ☐ NO

If no, do you have legal authority to make this application for use of another's land? ☐ YES ☐ NO

Provide the owner name(s), address, and phone number: _____

Section 4. PLACE OF USE

Attach a copy of the legal description of the property (on which the water will be used) taken from a real estate contract, property deed or title insurance policy, or copy it carefully in the space below.

Area served by the City of Pasco.						
¼	¼	Section	Twp.	Range	County	Parcel No.
					Franklin	

Do you own all the lands on which the proposed place of use is located? ☒ YES ☐ NO.

If no, do you have legal authority to make this application for use of another's land? ☐ YES ☐ NO

Provide owner name(s), address, and phone number: _____

Are there any other water rights or claims associated with this property or water system? ☒ YES ☐ NO

If yes, provide the water right and/or claim numbers (SW) 11660, GW 7205-A(A), (SW) 10192(B), G3-25177C(A),
G3-26081C(A), G3-26081C(B), G3-25177C(B), S4-30976, G3-27413P-C, G3-27413P-D

Attach a map of your project showing the point of diversion/withdrawal and place of use. If platted property, be sure to include a complete copy of the plat map.

Section 5. WATER SYSTEM DESCRIPTION

Describe your proposed water system (include type and size of devices used to divert or withdraw water from source): The water system is owned and operated by the City of Pasco. The water system has two water treatment plants. The Butterfield Water Treatment Plant has an intake in the Columbia River. That intake has four pumps with a historical maximum flow rate of 40.38 cfs (26 MGD). The West Pasco Water Treatment Plant has in intake in the Columbia River. This intake has two pumps. The West Pasco Water Treatment Plant was built with the ability of future expansion in two phases. This will also require a future intake. The future intake will have four pumps. The capacity of that intake will be with a maximum flow rate of 38.7 cfs (25 MGD).

Section 6. DOMESTIC WATER SUPPLY SYSTEM INFORMATION
(Complete A or B, and C below)

A.) Domestic Water Systems only	B.) Municipal Water Systems only (defined under RCW 90.03.015)
Projected number of connections to be served: _____	Present population to be served water: <u>61,000 people</u>
Type of connections: _____ (e.g., home, recreational cabin)	Estimate future population to be served: <u>110,000 people</u> (20 year projection)
C.) Water System Planning	
Do you have a Water System Plan approved by the Washington State Department of Health, Drinking Water Division? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, date plan was approved <u>02/16/2011</u> Water System Number: <u>664003</u>	
Name of water system: <u>Pasco Water Department</u>	
Are you within the service area of an existing water system? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	
If yes, explain why you are unable to connect to the system: <u>The water would be used by the Pasco Water Department within the service area.</u>	

Section 7. IRRIGATION/STOCKWATER/OTHER FARM USES

Irrigation

Total number of acres requested to be irrigated under this application = _____ ACRES

NOTE: Outline the area to be irrigated on your attached map.

Stockwater

List number and kind of stock: _____

Is the proposed project for a dairy farm? ☐ YES ☐ NO

Other Proposed Farm Uses

Describe all proposed uses: _____

Family Farm Water Act (RCW 90.66):

Calculate the acreage in which you have a controlling interest, including only:

- Acreage irrigated under water rights acquired after December 8, 1977,
- Acreage proposed to be irrigated under this application, and
- Acreage proposed to be irrigated under other pending application(s).

Is the combined acreage under existing rights greater than 6000 acres? ☐ YES ☐ NO

Do you have a controlling interest in a Family Farm Development Permit? ☐ YES ☐ NO

If yes, enter Permit No: _____

Section 8. OTHER WATER USES

Hydropower

Indicate total feet of head _____ and proposed capacity in kilowatts: _____

Describe works: _____

Indicate all uses to which power is to be applied: _____

FERC License No: _____

Mining/Industrial Use

Describe use, method of supplying and utilizing water: _____

Other Use

Section 9. WATER STORAGE

Will you be using a dam, dike, or other structure to retain or store water? ☒ YES ☐ NO

Are you proposing to store more than 10 acre-feet of water? ☒ YES ☐ NO

Will the water depth be 10 feet or more? ☒ YES ☐ NO

If you answered yes to any of the above questions, please describe: There is an existing storage capacity in the Pasco Water Department of 49.7 ac-ft (16.2 MG). This storage includes an underground reservoir, and three storage tanks. There will be a need for future storage tanks. The location and size is yet to be determined.

NOTE: If you will be storing 10 acre-feet or more of water and/or if the water depth will be 10 feet or more at the deepest point and some portion of the storage will be above grade, you must also complete an Application for Permit to Construct a Reservoir and a Dam Construction Permit and Application.

Section 10. DRIVING DIRECTIONS

Provide detailed driving directions to the project site: Butterfield Water Treatment Plant: from the intersection of 10th Avenue and “A” Street, travel west to S. 12th Avenue, turn south on S. 12th Avenue for a block, turn west into the parking lot at the Plant. West Pasco Water Treatment Plant: from the intersection of Court Street and Broadmoor Boulevard, travel in a northwesterly direction past Road 111, before crossing under the I-182 freeway turn northerly into the Plant.

Site Address: Butterfield Water Treatment Plant: 1036 West "B" Street, West Pasco Water Treatment Plant: 11315 W. Court Street.

Section 11. REQUIRED SIGNATURES

I certify that the information provided in this application is true and accurate to the best of my knowledge. I understand that in order to process my application, I grant staff from the Department of Ecology access to the site for inspection and monitoring purposes. Even though the employees of the Department of Ecology may have assisted me in the preparation of the above application, all responsibility for the accuracy of the information rests with me, the applicant.

Gary Crutchfield, City Manager
Print Name
(Applicant or authorized representative)

Signature _____

9/6/11

Date _____

Gary Crutchfield, City Manager
Print Name
(Legal Owner or Part Owner Place of Use)

Signature _____

9/6/11

Date _____

Print Name
(Legal Owner or Part Owner Place of Use)

Signature _____

Date _____

Print Name
(Legal Owner or Part Owner Place of Use)

Signature

Date _____

Please check the region in which the project is located:

Please check the Region in which the project is located.		
*Submit your application to: DEPARTMENT OF ECOLOGY CASHIERING SECTION PO BOX 47611 OLYMPIA, WA 98504-7611	<input type="checkbox"/> Central Regional Office 15 W Yakima Avenue, Suite 200 Yakima, WA 98902 (509) 575-2490	<input checked="" type="checkbox"/> Eastern Regional Office 4601 N. Monroe Spokane, WA 99205-1295 (509) 329-3400
	<input type="checkbox"/> Northwest Regional Office 3190 – 160 th Avenue SE Bellevue, WA 98008-5452 (425) 649-7000	<input type="checkbox"/> Southwest Regional Office PO Box 47775 Olympia, WA 98504-7775 (360) 407-6300